

May 22, 2003

David Martinez
TWCC Medical Dispute Resolution
4000 IH 35 South, MS 48
Austin, TX 78704

MDR Tracking #: M2-03-0935-01
IRO #: 5251

___ has been certified by the Texas Department of Insurance as an Independent Review Organization. The Texas Worker's Compensation Commission has assigned this case to ___ for independent review in accordance with TWCC Rule 133.308 which allows for medical dispute resolution by an IRO.

___ has performed an independent review of the proposed care to determine if the adverse determination was appropriate. In performing this review, all relevant medical records and documentation utilized to make the adverse determination, along with any documentation and written information submitted, was reviewed.

The independent review was performed by a matched peer with the treating doctor. This case was reviewed by a licensed Medical Doctor with a specialty and board certification in Orthopedic Surgery. The ___ health care professional has signed a certification statement stating that no known conflicts of interest exist between the reviewer and any of the treating doctors or providers or any of the doctors or providers who reviewed the case for a determination prior to the referral to ___ for independent review. In addition, the reviewer has certified that the review was performed without bias for or against any party to the dispute.

CLINICAL HISTORY

___ was working as a broiler cook for ___ on ___ when he injured his right knee. On that date he was handling dry goods and vegetable products. As he squatted and performed a lifting maneuver, he experienced severe right knee pain.

He came under the care of ___ on March 26, 2001 and underwent a comprehensive medical evaluation. X-rays of the right knee demonstrated moderate osteoarthritis. An MRI of the right knee was performed and it demonstrated tricompartment osteoarthritis with degeneration of the anterior horn and posterior horn of the medial meniscus. There was a complete tear of the right ACL, age undetermined. ___ was given physical therapy at ___.

On October 11, 2001, the patient underwent arthroscopy by ___. Records indicate that the patient underwent a chondroplasty of the medial and lateral femoral condyle, partial synovectomy and a debridement. The operative report demonstrates hypertrophic and degenerative changes in the medial femoral condyle with severe chondromalacia of the medial tibial plateau with exposed bone. The anterior cruciate ligament was demonstrated to be intact as well as the posterior cruciate ligament.

Post-operatively, the patient underwent physical therapy. He is currently taking anti-inflammatory medicines.

___ has undergone a peer review dated August 7, 2002 by ___, who astutely stated that the patient may need a home exercise program, synvisc injections, knee brace, weight reduction and a total knee replacement in the future. On March 20, 2002, ___ a commission-selected doctor, stated that this patient had reached MMI. Records indicate that he is morbidly obese, weighing approximately 380 pounds.

REQUESTED SERVICE

A total knee replacement is requested for this patient.

DECISION

The reviewer disagrees with the prior adverse determination.

BASIS FOR THE DECISION

Records indicate that ___ is a 49-year-old morbidly obese gentleman who injured his right knee on ___. He failed conservative treatment and underwent an arthroscopy in October of 2001. This demonstrated tricompartment degenerative joint disease with no ACL, PCL or meniscal tearing. He has persistent right knee pain, despite arthroscopy. This patient has a history of right knee arthritis that pre-dates the injury. He has had surgery in 1997 and an MRI that demonstrated significant tricompartment DJD of the right knee.

Based on the information presented, the reviewer finds that this patient does qualify for a total knee replacement. This determination is due to the fact that the patient has tricompartmental degenerative joint disease of the right knee and has failed all conservative treatment. The next logical step is a total knee replacement.

___ has performed an independent review solely to determine the medical necessity of the health services that are the subject of the review. ___ has made no determinations regarding benefits available under the injured employee's policy.

As an officer of ___, I certify that there is no known conflict between the reviewer, ___ and/or any officer/employee of the IRO with any person or entity that is a party to the dispute.

___ is forwarding by mail and, in the case of time sensitive matters by facsimile, a copy of this finding to the treating doctor, payor and/or URA, patient and the TWCC.

Sincerely,

YOUR RIGHT TO REQUEST A HEARING

Either party to this medical dispute may disagree with all or part of the decision and has a right to request a hearing.

In the case of prospective ***spinal surgery*** decision, a request for a hearing must be made in writing and it must be received by the TWCC Chief Clerk of Proceedings within 10 days of your receipt of this decision. (20 Tex. Admin. Code 142.5(c)).

In the case of other ***prospective (preauthorization) medical necessity*** disputes a request for a hearing must be in writing, and it must be received by the TWCC Chief Clerk of Proceedings within **20** (twenty) days of your receipt of this decision (28 Tex. Admin. Code 148.3).

This decision is deemed received by you 5 (five) days after it was mailed (28 Tex. Admin. Code 102.4(h) or 102.5(d). A request for a hearing should be sent to: Chief Clerk of Proceedings, Texas Worker's Compensation Commission, P.O. Box 40669, Austin, TX 78704-0012. A copy of this decision should be attached to the request.

The party appealing this decision shall deliver a copy of its written request for a hearing to all other parties involved in the dispute, per TWCC rule 133.308(t)(2).

I hereby certify, in accordance with TWCC Rule 102.4 (h), that a copy of this Independent Review Organization decision was sent to the carrier, requestor, claimant (and/or the claimant's representative) and the TWCC via facsimile, U.S. Postal Service or both on this 22nd day of May 2003.